INFORMATION AND INSTRUCTIONS
NONRESIDENT SELLER'S PERMIT (S)
NONRESIDENT BREWER'S PERMIT (U)
NONRESIDENT MANUFACTURER'S LICENSE (BS)

FORM L-NRES-I (11/2020)

INFORMATION

NONRESIDENT SELLER'S PERMIT (S) - This permit allows the sale of <u>wine and distilled spirits</u> <u>in excess of 4% by weight</u> to Texas wholesalers or any other entities authorized to import alcohol into the state of Texas. The product must be shipped by a common carrier, which holds a Carrier's Permit. The State fee is \$300 with a surcharge of \$376. The permit will expire two years from date of issuance.

NONRESIDENT BREWER'S PERMIT (U) - This permit is issued only to the **actual manufacturer** of an ale or malt liquor. A Nonresident Brewer's Permit may only be issued to the holder of a Nonresident Seller's Permit (S). The product must be shipped by a common carrier, which holds a Carrier's Permit. The State fee is \$3,000 with a surcharge of \$376. The permit will expire two years from date of issuance. **Ale or malt liquor is defined as a malt beverage containing more than 4% alcohol by weight.**

manufacturer of a beer product. The holder of a Nonresident Manufacturer's License may transport beer into Texas by common carrier which holds a Carrier's Permit or in motor vehicles owned or leased by the nonresident manufacturer and may only be shipped and sold to holders of a Texas Importer's License (BI). The State fee is \$1,500 with a surcharge of \$576. The permit will expire two years from date of issuance. Beer is defined as a malt beverage containing ½ of 1% or more alcohol by volume and not more than 4% of alcohol by weight.

APPLICATION INSTRUCTIONS

ALL APPLICANTS: (S, U & BS)

Question 1

• Check appropriate license/permit type(s).

Question 2

Enter your trade name, (doing business as).

Question 3

• Enter the physical business location address.

Question 4

• Enter mailing address

Note: If application is being made for a foreign location, a U.S. mailing address may be provided.

Question 5

• Enter contact information, including an email address (mandatory).

Note: Information may be requested via email or by phone. It is your responsibility to report any changes to your contact information to this agency.

Question 6

Complete this question only if the applicant is applying as an individual (sole-proprietor).

Question 7

Provide the name and contact information for a primary contact person. This should be a person
who can answer questions TABC may have about the application. The contact phone and email
are mandatory and must be active and updated regularly. If additional information is needed, it
will be requested from this contact person. Delays in responding to requests may delay the
processing and approval of your license/permit.

Question 8

- Provide the name, address and contact information of your designated service agent.
- Form L-POA, included, MUST be filed with the Secretary of State prior to the approval of your application. Mail this form directly to the Secretary of State at the address located at the bottom of the form.

Note: Your Service Agent **must** be an individual and reside in the State of Texas.

Question 9

 Check the type of entity applying for the license/permit and complete the appropriate ownership page (Form L-C, L-P or L-LLC)

IMPORTANT INFORMATION

Reporting Applicant's Entity Structure

All officers, directors, stockholders and trustees holding ownership in the entity applying **MUST** be reported. 100% of ownership must be disclosed down to individuals (including their personal information). If any shares are held by another entity, you must complete a <u>separate</u> ownership form (L-C, L-P or L-LLC) reporting all officers, directors, stockholders, trustees holding ownership in that entity. **FAILURE**, to provide required information will delay the processing of your application.

Question 10

 Enter name of entity or individual owner applying for the license/permit. This is the name of your corporation, LLC, general partnership, etc.

Question 11

• Enter applicant's Federal Employer Identification No., if applicable.

Question 12

- Answer "Yes", if the applicant currently holds a license/permit under the same FEIN reported in question 11.
- If answered, "Yes" to the above question, you **must** provide your most currently issued permit number.
- If answered, "No", you must disclose 100% ownership by completing Form L-C, L-P or L-LLC

Question 13

If answered "Yes", you must complete an ownership page (L-C, L-P or L-LLC).
 Example of changes: change of officer(s), stockholder(s), merger, etc.
 If, answered "No", you are not required to complete the ownership page (Form L-C, L-P or L-LLC).

Question 14A

• If applicable, check the type of offense committed.

Question 14B

• If the termination of sentence is within the last 5 years, an explanation must be provided.

Question 15

• If answered 'YES' an explanation **must** be provided.

Question 16

• If answered 'YES' an explanation **must** be provided.

Question 17

- This question must be answered 'YES' to qualify for a nonresident seller's permit (S).
- List the name of the manufacturer and brands of distilled spirits or wine being shipped into Texas.

Note: A NONRESIDENT PERMIT (S) IS FOR WINE AND/OR DISTILLED SPIRITS ONLY. The name of the manufacturer and a list of brands is not required for beer, ale or malt liquor.

Nonresident Brewer's Permit (U) Applicants ONLY Questions 18 - 21 and 26 - 27

Question 18

• Texas only recognizes the actual manufacturer for ale and malt beverages over 4% alcohol content by weight. If you are not the importer, continue to question 19. If you are the importer of the ale and malt beverages products, you do not qualify for a nonresident brewer's permit (U).

Question 19

• Mark appropriate answer.

Question 20

• If answered "Yes", you must provide the Texas permit number of the contracted brewery.

Question 21

• If answered "Yes", you must provide the Texas permit number of the brewery with which you have entered into an alternating proprietorship agreement.

Nonresident Manufacturer's License (BS) Applicants ONLY Questions 22 through 27

Question 22

• Texas only recognizes the actual manufacturer for beer products under 4% alcohol content by weight. If you are the importer of ale and malt beverages you do not qualify for a nonresident manufacturer's license (BS). If you are not the importer, continue to question 23.

Question 23

Mark appropriate answer.

Question 24

• If answered "Yes", you **must** provide the Texas permit number of the contracted brewery.

Question 25

• If answered "Yes", you must provide the Texas permit number of the brewery with which you have entered into an alternating proprietorship agreement.

Question 26

• If answered "No", a fee interest bond in the amount of \$30,000 is required for each permit type for which you have applied.

Note: A bond is required if

- ✓ the applicant has a contract **or** alternating proprietorship agreement with another brewery to produce their beer, ale or malt beverage product, and
- ✓ does not hold an ownership interest in any brewing facility

Question 27

• If "Yes", you must provide the TTB number and copy of the TTB Brewer's Notice.

Acknowledgment

• Application must be signed by the individual owner or a partner/officer/manager of the applying entity before a notary public. See chart on signature page to determine who may sign.

IMPORTANT: If you, the applicant, are a party to an alternating brewery proprietorship or a contract brewery arrangement, **each entity** that is a party to that arrangement/agreement must hold an *additional* license(s)/permit(s) at the location where brewing services are conducted.

Fees and surcharges **MUST** be paid at the time of application submission. <u>Click here</u> to see the TABC Fee Chart. Fees and surcharges may NOT be prorated or refunded. Submit your application along with fees and surcharges with a cashier's check, money order, or firm check from corporate permittee payable to the Comptroller of Public Accounts.

Mail original application with proper fees and surcharges to:

P.O. Box 13127
Austin, Texas 78711



APPLICATION FOR NONRESIDENT SELLER'S PERMIT (S) NONRESIDENT BREWER'S PERMIT (U) NONRESIDENT MANUFACTURER'S LICENSE (BS)

L-NRES (11/2020)

A	All statutory and rule references mentioned in this application refer to and can be found in the Texas Alcoholic Beverage Code or Rules located on our website. www.tabc.texas.gov/laws/code and rules.asp					
_		ISSUE DATE		FEE	SURCHARGE	
Only	S					
TABC Use Only	U					
	В					
1.	APPLICATION FILED FOR:		Registry No.			
	S NONRESIDENT SELLER'S PE	ERMIT (S)				
	U NONRESIDENT BREWER'S P	ERMIT (U)				
	BS NONRESIDENT MANUFACTU	IRER'S LICENSE (BS)				
2.	Trade Name of Business					
3.	Location Address					
	City	County		Foreign Country	State Zip Code (9 digits)	
4.	Mailing Address	(City/Foreign Cour	ntry	State Zip Code (9 digits)	
5.	Area Code + Business Phone	Area Code + Alterna	ite Phone	E-mail Address		
_	Full and Name (Last First Middle)	INDIVII	DUAL			
6.	Full Legal Name (Last, First, Middle)					
	Social Security Number		Date of Bi	rth (mm/dd/yyyy)		
	•			, , , , , , , , , , , , , , , , , , , ,		
	Residential Address		City		State Zip Code (9 digits)	
PRIMARY CONTACT PERSON The primary contact person should be a person who can answer questions TABC may have about the application. The contact phone and email are mandatory and must be active and updated regularly. If additional information is needed, it will be requested from this contact person. Delays in responding to requests may delay the processing and approval of your license/ permit.						
7.	Contact Person:	requests may using the process	Relation to Busin			
	Phone (mandatory):		Email (mandator	y):		
TABC USE	PROCESSOR REVIEW DATE		WRITTEI	N PROCESS DATE		
TAB	END PROCESS DATE			PROCESSOR I.D.		
	TABC DATESTAMP					

	ALL APPLICANTS	
8.	Have you filed a Power of Attorney form (L-POA) with the Texas Secretary of State as required by the Texas Alcoholic Beverage Code Section 37.05?	☐ Yes ☐ No
	Form L-POA must be filed prior to the issuance of your permit. Provide the name, address, phone number and email of the service agent on file with the Secretary of State. The service agent must be a resident of Texas.	
_	Name:	
_	Address:	
_	Phone Number:	
	Email:	
	BUSINESS OWNERSHIP	
bus be •	u must provide complete ownership information on appropriate forms listed below. Select the entity page(s) siness structure. All officers, directors, stockholders, trustees, and beneficiaries holding ownership disclosed. Use the forms listed below to report your business structure. Forms can be found here . L-C (Corporation, Trust, City, County or University) L-LLC (Limited Liability Company) L-P (Partnership) Type of Owner/Applicant	that coincides with your in this business must
ی . ۲	☐ Individual ☐ Limited Partnership ☐ City/County/University	
	☐ Corporation ☐ Limited Liability Partnership ☐ Other	
Г	☐ Limited Liability Company ☐ Trust	
-	☐ Partnership ☐ Joint Venture	
10.	Owner of Business/Applicant (Name of Corporation, LLC, etc.)	
	omici of Business, ppilount (Marie of Golperation, 220, 500.)	
11.	Federal Employer Identification No. (FEIN) (if applicable)	
12.	Do you hold a current TABC license/permit issued under the above FEIN?	☐ Yes ☐ No
	If "YES," provide your most recently issued license/permit number.	
	If "NO," you must provide your entire ownership on the applicable business structure form(s) (L-C, L-LLC, L-P).	
13.	If you hold a current license/permit under the above FEIN, has there been a change in the ownership or business structure since the submission of your last application? If "YES," you must complete this application in its entirety. If "NO," you do not need to report your business ownership on form(s) L-C, L-P or L-LLC.	☐ Yes ☐ No
	BUSINESS INFORMATION	
14A.	If any person listed in this Business Packet, or his or her spouse, has been finally convicted or received	
	deferred adjudication for any of the offenses below, indicate by checking all that apply:	
	any felony offense	
	☐ prostitution	
	☐ bookmaking	
	gambling or gaming	
	☐ bootlegging	
	☐ vagrancy offense involving moral turpitude	
	any offense involving dangerous drugs, synthetic cannabinoids or controlled	
	substances as defined in Texas Controlled Substances Act	
	any offense involving firearms or a deadly weapon	
	more than three violations of the Texas Alcoholic Beverage Code relating to minors	
	violations of the Texas Alcoholic Beverage Code resulting in a criminal fine of \$500	
	violations of an individual's civil rights or discrimination against an individual on the	
	basis or race, color, creed or national origin	
14B.	. Has it been five years since the termination of a sentence, parole or probation served for any offenses	☐ Yes ☐ No ☐ N/A
	indicated above?	
	If it has not been five years since the termination of a sentence, parole or probation served, attach an expl	anation.

	Has any person listed in this application, or his or her spouse, had a cancellation of a license or permit in the past five years?	☐ Yes ☐ No			
	If "YES," attach an explanation.				
	ALL APPLICANTS				
The a	applicant, license/permit holder, agent, servant or employee may not directly or indirectly have any overlappin	g ownerships or other			
prohi	bited relationships (including unfair competition and unlawful trade practices) between those engaged in the a	alcoholic beverage			
indus	try at different levels, that is, between a manufacturer and a wholesaler or retailer, or between a wholesaler	and a retailer, as the			
word	s "wholesaler," "retailer," and "manufacturer" are ordinarily used and understood, regardless of the specific na	ames given a			
licens	se\permit. Reference Chapter 102 et seq.				
16.	Is any person involved in this application in violation of the above requirements? If "YES," attach an explanation.	☐ Yes ☐ No			
	FOR NONRESIDENT SELLER'S PERMIT (S) (Distilled Spirits and Windows Chapter 37	ine)			
" (a any to or wing the to sour many to corporate the total and the tota	any type of wholesaler's or winery permit unless the nonresident seller is the primary source for the brand of distilled spirits or wine that is ordered. (b) In this section, "primary American source of supply" means the distiller, the producer, the owner of the commodity at the time it becomes a marketable product, the bottler, or the exclusive agent of any of those. To be the "primary American source of supply" the nonresident seller must be the first source, that is the manufacturer or the source closest to the manufacturer, in the channel of commerce from whom the product can be secured by Texas wholesalers and Texas wineries. Except as provided by Subsection (c), a product may have only one primary American source of supply to Texas. (c) A product may have more than one primary American source of supply to Texas if the product is a wine that is bottled or produced outside of the United States."				
	FOR NONRESIDENT BREWER'S PERMIT (U) (Malt greater than 4% of alcohol by weight) Chapter 13				
18.	Are you, the applicant, the importer of the ale to be shipped into Texas?	☐ Yes ☐ No			
	If "YES," STOP. You do not qualify to hold this permit. Permit must be held by the actual manufacturer.				
19.	Are you, the applicant, the actual manufacturer of the ale to be shipped into Texas?	☐ Yes ☐ No			
20.	Do you, the applicant, contract with another brewery to produce your ale product? If "YES," provide TABC License/Permit number of that brewery.	☐ Yes ☐ No			
	Is your product brewed at their location?	☐ Yes ☐ No			
21.	Do you, the applicant, utilize an alternating proprietorship agreement to produce your ale product? If "YES," provide TABC License/Permit number of that brewery.	☐ Yes ☐ No			
	Is your product brewed at their location?	☐ Yes ☐ No			
	FOR NONRESIDENT MANUFACTURER'S LICENSE (BS) (Malt 4% or less of alcohol by weight) Chapter 63				
22.	Are you, the applicant, the importer of the beer to be shipped into Texas? If "YES," STOP. You do not qualify to hold this permit. Permit must be held by the actual manufacturer.	☐ Yes ☐ No			
23	Are you, the applicant, the actual manufacturer of beer to be imported into the State of Texas?	☐ Yes ☐ No			

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24. Do you, the applicant, contract with another brew If "YES," provide the TABC license/permit number				·	☐ Yes ☐ No
	ii 1E5, provide the	TABC license/permit nu	mber or mar	brewery.	
	Is your product brewed at their location?			☐ Yes ☐ No	
25.	•	• • • • • • • • • • • • • • • • • • • •		agreement to produce beer product?	☐ Yes ☐ No
	If " YES ," provide TAI	BC license/permit numb	er of that bre	ewery.	
	Is your product brewe	ad at their location?			☐ Yes ☐ No
			6 DEDMI	T (U) AND NONRESIDENT MANUFAC	THEED'S
	FOR NONKESI	DENI BREWER		ENSE (BS)	TUKEK 3
26.	If guestions 20, 21, 2	M and/or 25 were answe		do you, the applicant, own a fee interest	
20.	(ownership) in a brev		sied ILS, (do you, the applicant, own a fee interest	☐ Yes ☐ No
		-	which must b	oe on file and approved to issue your renewal.	
	Fee Interest Bond f	orm and instructions ca	n be downloa	aded <u>here</u>	
27.				he Alcohol and Tobacco Tax and Trade Bureau	
	of the United States	Department of the Treas	sury?		☐ Yes ☐ No
	If "YES," provide TT	B Brewers Notice Numb	er	and attach copy .	
			ACKNO	WLEDGMENT	
WARN	IING: Section 101.69 of	the Texas Alcoholic Bever	age Code stat	es: "a person who knowingly makes a false statement o	r false representation in
an app	olication for a permit or li	cense or in a statement, re	eport, or other	instrument to be filed with the commission and required t	o be sworn commits an
offens	e punishable by imprisor	ment in the Texas Departn	nent of Crimin	al Justice for not less than 2 nor more than 10 years."	
	If Applicant is:	Who Must Sign:	PRINT	SEE CHART ON LEFT TO DETERMINE WHO MUST S	IGN BELOW
	Individual	Individual Owner			
	Partnership	Partner	SIGN		
	Corporation	Officer	HERE:		
	Limited Partnership	General Partner		Before me, the undersigned authority, on this	
Limit	ted Liability Partnership	General Partner	day of	, 20, the pers	
Lin	nited Liability Company	Officer or Manager		to the foregoing application personally ap	
				by me, states under oath that he or she read t	
			and that all the facts therein set forth are true and correct.		
al al			and th	at all the facts therein set forth are the and con	rect.
(SEAL)			SIGN HERE:		
	·			NOTARY PUBLIC	
	Mail o	completed applic		d appropriate <u>fees and surcharges</u> to	:
				TABC	
				Box 13127	
			Austi	n, TX 78711	

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KNOW ALL MEN BY THESE PRESENTS:

POWER OF ATTORNEY DESIGNATING SERVICE AGENT

L-POA (11/2020)

I,(Individual's N	, as owner/partner/manager/officer of lame)				
	located at				
(Trade Name of Business)	(Address)				
· · · · · · · · · · · · · · · · · · ·	(0) (0)				
(City)	(State/Country)				
appoint(Name of Service Agent)	of (Name of Business/Employer)				
located at(Address)	,lexas,				
a resident of Texas, as my service agent in Texa	as, as required by the Texas Alcoholic Beverage Code; upon whom notice of a				
hearing may be served concerning matters, proc	eedings, hearings and causes involving the refusal, cancellation or suspension				
	olic Beverage Commission for the above described entity.				
•	one beverage commission for the above described entity.				
SIGN HERE:					
	Applicant				
Α	ACKNOWLEDGMENT				
BEFORE ME, the undersigned authori	ty, on this the day of				
A.D., the person whose na	A.D., the person whose name is subscribed to the foregoing instrument as owner, partner, manager or				
officer personally appeared and acknowledged to me that the matters stated therein are true and that this form was executed					
for the purpose and consideration therein expres	esed.				
SIGN					
HERE:	Notary Public				
SEAL					
	INSTRUCTIONS				
	Nonresident Brewer's Permit or a Nonresident Manufacturer's License, the Secretary of State designating a Texas resident, 18 years or older, as service				
2. Your appointed service agent may be a repr	resentative of the distributor/wholesaler licensed in the State of Texas.				
	d to this commission within 10 days of the change. Failure to do so may result				
in administrative action against your permit/					
_	d directly to the Secretary of State, Statutory Document Section,				
P.O. Box 12079, Austin, Texas 78711-207	ਰ.				

CORPORATION



L-C (11/2020)

This Corporation form should be completed for original applications or for changes of officers, directors, stockholders, trustees, and beneficiaries holding ownership in this business. This form is included in the Business Packet (L-B) for new applicants. License/Permit holders reporting changes use Business Packet for Reporting Changes (L-BRC).

For more information contact your local TABC office or visit us at: www.tabc.texas.gov ENTITY INFORMATION 1. Federal Employer Identification Number (FEIN) 2. Business Entity Name 3. Filing Number 4. Date Filed (mm/dd/yyyy) State Class and Number of Shares Issued **CORPORATE OWNERSHIP INFORMATION** Officer Director Stockholder Trustee Beneficiary (Mark All That Apply) First Name Last Name Title ☐ Out of Country Date of Birth (mm/dd/yyyy) Specify Class & No. of Shares SSN Officer Director Stockholder Trustee Beneficiary (Mark All That Apply) Last Name First Name MI Title SSN Out of Country Date of Birth (mm/dd/yyyy) Specify Class & No. of Shares Stockholder Officer Director Trustee Beneficiary (Mark All That Apply) First Name Last Name MI Title SSN Out of Country Date of Birth (mm/dd/yyyy) Specify Class & No. of Shares Officer Director Stockholder Trustee (Mark All That Apply) Beneficiary Last Name First Name MI Title SSN Out of Country Date of Birth (mm/dd/yyyy) Specify Class & No. of Shares

CORPORATE OWNERSHIP INFORMATION CONTINUED				
☐ Officer ☐ Director ☐ Stockholder ☐	Trustee Beneficiary	(Mark All That Apply)		
Last Name	First Name	MI Title		
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Specify Class & No. of Shares		
☐ Officer ☐ Director ☐ Stockholder ☐	☐ Trustee ☐ Beneficiary	(Mark All That Apply)		
Last Name	First Name	MI Title		
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Specify Class & No. of Shares		
☐ Officer ☐ Director ☐ Stockholder ☐	Trustee Beneficiary	(Mark All That Apply)		
Last Name	First Name	MI Title		
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Specify Class & No. of Shares		
☐ Officer ☐ Director ☐ Stockholder ☐	Trustee Beneficiary	(Mark All That Apply)		
Last Name	First Name	MI Title		
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Specify Class & No. of Shares		
☐ Officer ☐ Director ☐ Stockholder ☐	Trustee Beneficiary	(Mark All That Apply)		
Last Name	First Name	MI Title		
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Specify Class & No. of Shares		
Officer Director Stockholder		(Mark All That Apply)		
Last Name	First Name	MI Title		
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Specify Class & No. of Shares		
Officer Director Stockholder	Trustee Beneficiary	(Mark All That Apply)		
Last Name	First Name	MI Title		
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Specify Class & No. of Shares		
☐ Officer ☐ Director ☐ Stockholder ☐	Trustee Beneficiary	(Mark All That Apply)		
Last Name	First Name	MI Title		
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Specify Class & No. of Shares		
IF YOU NEED MORE SPACE	: USE ADDITIONAL C	OPIES OF THIS PAGE		

LIMITED LIABILITY COMPANY



L-LLC (11/2020)

This Limited Liability Company form should be completed for original applications or for changes of officers, managers, and members holding ownership in this business. This form is included in the Business Packet (L-B) for new applicants. License/Permit holders reporting changes use the Business Packet for Reporting Changes (L-BRC). For individuals outside the United States, not holding a social security number check the "Out of Country" box.

For more information contact your local TABC office or visit us at: www.tabc.texas.gov				
EN	ITITY INFORMATION			
1. Federal Employer Identification Number (F	FEIN)			
2. Business Entity Name				
3. Filing Number	4. Member Managed	or Manager Managed		
	☐ Member Managed	☐ Manager Managed		
5. Date Filed (mm/dd/yyyy) State		·		
LIMITED LIABILITY C	OMPANY OWNERSHIP I	NFORMATION		
<u> </u>	rk All That Apply)			
Last Name	First Name	MI Title		
SSN Out of Country	Date of Birth (mm/dd/yyyy) Percentage Membership or Units Held			
☐ Officer ☐ Manager ☐ Member (Ma	rk All That Apply)			
Last Name	First Name	MI Title		
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Percentage Membership or Units Held		
☐ Officer ☐ Manager ☐ Member (Ma	rk All That Apply)			
Last Name	First Name	MI Title		
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Percentage Membership or Units Held		
☐ Officer ☐ Manager ☐ Member (Mark All That Apply)				
Last Name	First Name	MI Title		
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Percentage Membership or Units Held		

LIMITED LIABILITY COMPANY OWNERSHIP INFORMATION CONTINUED				
☐ Officer ☐ Manager ☐ Member (Ma	rk All That Apply)			
Last Name	First Name	MI T	itle	
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Percentage Membership	or Units Held	
☐ Officer ☐ Manager ☐ Member (Ma	rk All That Apply)			
Last Name	First Name	MI T	itle	
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Percentage Membership	or Units Held	
	, ,,,,,,			
☐ Officer ☐ Manager ☐ Member (Ma	rk All That Apply)			
Last Name	First Name	MI T	itle	
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Percentage Membership	or Units Held	
_ ,	, , , , , , , , , , , , , , , , , , , ,			
Officer Manager Member (Ma	rk All That Apply)			
Last Name	First Name	MI T	itle	
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Percentage Membership	or Units Held	
Got of Godinity	Date of Birti (IIIII/dd/yyyy)	1 creentage wembership	or orms ricia	
Officer Manager Member (Ma	rk All That Apply)			
Last Name	First Name	MI T	itle	
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Percentage Membership	or Units Held	
Got of Godinay	Bate of Birth (miniadayyyyy)	1 Greenlage Wernbereinp	or or morrora	
Officer Manager Member (Ma	rk All That Apply)			
Last Name	First Name	MI T	itle	
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Percentage Membership	or Units Held	
,	(, , , , , , ,			
Officer Manager Member (Ma	rk All That Apply)			
Last Name	First Name	MI T	itle	
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Percentage Membership	or Units Held	
		, crosmage memorismp		
Officer Manager Member (Mark All That Apply)				
Last Name	First Name	MI T	itle	
SSN Out of Country	Date of Birth (mm/dd/yyyy)	Percentage Membership	or Unite Held	
Got of Southly	Date of Diffi (IIIII/dd/yyyy)	1 Groomage Membership	, or ornio rieiu	
IF YOU NEED MORE SPACE	E USE ADDITIONAL CO	PIFS OF THIS PAGE	1	

PARTNERSHIP



L-P (11/2020)

This Partnership form should be completed for original applications or for changes of partnerships, limited partnerships, limited liability partnerships, and joint ventures holding ownership in this business. This form is included in the Business Packet (L-B) for new applicants. License/Permit holders reporting changes use Business Packet for Reporting Changes (L-BRC).

holders reporting changes use Business Packet for Reporting Changes (L-BRC). For more information contact your local TABC office or visit us at: www.tabc.texas.gov ENTITY INFORMATION 1. Federal Employer Identification Number (FEIN). 2. Business Entity Name 3. Filing Number 4. Date Filed (mm/dd/yyyy) State PARTNERSHIP INFORMATION ☐ General Partner ☐ Limited Partner Last Name First Name ΜI Title SSN Out of Country Date of Birth (mm/dd/yyyy) Percent of Interest ☐ General Partner ☐ Limited Partner Last Name First Name MI Title SSN Out of Country Date of Birth (mm/dd/yyyy) Percent of Interest ☐ General Partner ☐ Limited Partner Last Name First Name ΜI Title SSN Out of Country Date of Birth (mm/dd/yyyy) Percent of Interest ☐ General Partner ☐ Limited Partner Last Name First Name Title MI Percent of Interest SSN Out of Country Date of Birth (mm/dd/yyyy)

PARTNERSH	HIP INFORMATION co	ONTINUED		
☐ General Partner ☐ Limited Partner				
Last Name	First Name		Title	
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